

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M.P.		6/20/01
O.I.P.E. CLASSIFIER		10/15/73	7/1/01
FORMALITY REVIEW			8/10/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

BEST AVAILABLE COPY

Claim	Date
Final Original	
1	4/1/08
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Claim	Date
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If more than 150 claims or 10 actions  
 - staple additional sheet here

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